

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DM</i>		
O.I.P.E. CLASSIFIER	<i>DM</i>		
FORMALITY REVIEW		<i>7223</i>	<i>1/13/99</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	8/2/00
2	✓	✓	1/19/01
3	✓	✓	8/10/01
4	✓	✓	12/6/01
5	✓	✓	12/20/01
6	✓	✓	12/20/01
7	✓	✓	12/20/01
8	✓	✓	12/20/01
9	✓	✓	12/20/01
10	✓	✓	12/20/01
11	✓	✓	12/20/01
12	✓	✓	12/20/01
13	✓	✓	12/20/01
14	✓	✓	12/20/01
15	✓	✓	12/20/01
16	✓	✓	12/20/01
17	✓	✓	12/20/01
18	✓	✓	12/20/01
19	✓	✓	12/20/01
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44	✓	✓	12/20/01
45	✓	✓	12/20/01
46	✓	✓	12/20/01
47	✓	✓	12/20/01
48	✓	✓	12/20/01
49	✓	✓	12/20/01
50	✓	✓	12/20/01

Claim	Final	Original	Date
51	✓	✓	12/20/01
52	✓	✓	12/20/01
53	✓	✓	12/20/01
54	✓	✓	12/20/01
55	✓	✓	12/20/01
56	✓	✓	12/20/01
57	✓	✓	12/20/01
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78	✓	✓	12/20/01
79	✓	✓	12/20/01
80	✓	✓	12/20/01
81	✓	✓	12/20/01
82	✓	✓	12/20/01
83	✓	✓	12/20/01
84	✓	✓	12/20/01
85	✓	✓	12/20/01
86	✓	✓	12/20/01
87	✓	✓	12/20/01
88	✓	✓	12/20/01
89	✓	✓	12/20/01
90	✓	✓	12/20/01
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92	✓	✓	12/20/01
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96	✓	✓	12/20/01
97	✓	✓	12/20/01
98	✓	✓	12/20/01
99	✓	✓	12/20/01
100	✓	✓	12/20/01

Claim	Final	Original	Date
101			
102			
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If more than 150 claims or 10 actions  
 staple additional sheet here

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